

QUALITY ASSURANCE FRAMEWORK

1. Introduction

The purpose of this paper is to update Health Scrutiny Committee on the Quality Assurance Framework. This is in conjunction with a presentation on the processes and systems in place to ensure quality services are being commissioned and directly provided by NHS Herefordshire and Herefordshire Council.

2. Background

NHS Herefordshire and Herefordshire Council, through the Commissioning for Quality Strategy (Appendix 1), are committed to ensuring high quality services are commissioned and provided to the people of Herefordshire. The Quality Assurance Framework provides a mechanism to report on the success of the strategy. The framework ensures quality is the cornerstone of every stage of the commissioning process.

In view of national reviews such as The Next Stage Review conducted by Lord Darzi and policy direction of World Class Commissioning it is critical that there is clear evidence that quality is the focus of commissioning.

3. Quality Assurance

3.1 Commissioning Services

Lord Darzi in The Next Stage Review is very clear that there are three distinct components to a high quality service; clinical effectiveness, customer experience and safety. All three components have to be evidenced to be assured that a quality service has been commissioned and consequently provided.

The following provides a brief overview of areas to be considered when commissioning high quality services:

3.1.1 Clinical/care Governance

This area covers commissioned and independent contractors; in

- Clinical and care cost effectiveness
 - Care Pathways
 - Professional development
 - Audit
 - QOF
 - Medicines Management
- Governance

- Re-validation
- Post registration workforce development
- Risk assurance
 - Clinical risk
- Compliance with Standards
 - National eg Standards for Better Health
 - Local eg Stroke
- Compliance with guidelines
 - National eg. NICE, NPSA
 - Local eg. Falls

3.1.2 Safety

It is important that there is an appropriate level of assurance that people in Herefordshire feel safe when accessing services.

- Notification of, and learning from, events and incidents
 - SUI (Serious Untoward Incidents)
 - Incident Reporting
 - RIDDORs
- Cleanliness and healthcare associated infections
 - Directly provided services and commissioned services
 - Health Economy wide responsibility
- Safeguarding both vulnerable adults and children
 - Adult safeguarding across Health and Social Care
 - Children Safeguarding across the Health economy
- Medicine Management
 - Controlled Drugs
 - High Cost Drugs
 - Monitoring prescribing

3.1.3 Customer Experience

The customer experience and/or view should be at the centre of the commissioning process. This enables expectations to be managed and appropriate outcomes developed and measured. The formation of the Public Experience and Feedback Committee ensures that information on experience is gathered from all sectors and provides a mechanism to inform commissioners of the quality of services being commissioned from a users perspective.

3.2 Quality Schedules

The strategy ensures that every contract has a quality schedule that can be monitored and reviewed to ensure a level of assurance to be established and risks identified for every contract. This is undertaken by a monthly Quality Review Forum with all main providers. The purpose is to drive continuous

service improvement where appropriate and also more reactive commissioning if necessary.

The schedule (Appendix 1) is very comprehensive and can be adapted to suit the provider contract as necessary.

A quality report is presented to the Performance and Quality Committee.

4. Conclusion

There has been significant progress in the development of a Quality Assurance framework. The Quality Schedule provides a comprehensive process for ensuring all contracts address the quality of services being provided. Robust monitoring of contracts ensures a culture of continuous service improvement and an effective commissioning process.

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